

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																
1 Date of Request: _____			2 Serial/Patent # _____													
3 Please refund the following fee(s):				4 PAPER NUMBER	5 DATE FILED	6 AMOUNT										
	Filing					\$										
	Amendment					\$										
	Extension of Time					\$										
	Notice of Appeal/Appeal					\$										
	Petition					\$										
	Issue					\$										
	Cert of Correction/Terminal Disc.					\$										
	Maintenance					\$										
	Assignment					\$										
	Other					\$										
				7 TOTAL AMOUNT OF REFUND		\$										
				8 TO BE REFUNDED BY:												
10 REASON:				Treasury Check												
	Overpayment			Credit Deposit A/C #:												
	Duplicate Payment			9 <table border="1"><tr><td></td><td></td><td>--</td><td></td><td></td><td></td><td></td></tr></table>								--				
		--														
No Fee Due (Explanation):																
11 REFUND REQUESTED BY:																
TYPED/PRINTED NAME:				TITLE:												
SIGNATURE:				Adjustment Date: 07/22/2005 PKIDWELL 03/11/2005 SHATAKRO 00000093 032060 10526 03 FC:1632 500.00 CR												
OFFICE:																
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****																
APPROVED:				DATE:												

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: